

	Board Advisory Date:	Clinical Practice Advisories: January- June 2006
LNA PT/INR	January 19, 2006	<p>Question: Can a LNA call PT/INR results in to a physician's office if no order is taken?</p> <p>Board Response: Yes. The LNA can call PT/INR results in to the physician's office as long as the LNA does not receive an order for the patient.</p>
Regional block	January 19, 2006	<p>Question: Can a RN inject the local anesthetic (lidocaine) into a catheter for the purpose of a regional block such as an interscalene or femoral block when assisting the anesthesia provider in this procedure?</p> <p>Board Response: Nurses may perform the mechanical task of pushing the plunger of the syringe as a "third hand" when requested by and performed under the direct supervision of the anesthesiology provider. The anesthesiology provider must remain responsible for the appropriate administration of the medication which would include drawing up, mandatory labeling and associated medication administration responsibilities. A nurse may not be required to provide this assistance. The nurse must possess the competencies to perform the mechanical task (aspiration, rate of injection, etc.) Appropriate facility policies must be in place.</p>
Home care immunizations	February 16, 2006	<p>Question: Can a RN carry immunizations to a patient's home and administer the immunization in that setting?</p> <p>Board Response: Referred to the Board of Pharmacy and Board of Medicine pursuant to RSA 318:42 XI for joint agreement of</p>

		<p>this practice. Board of Pharmacy and Board of Medicine are in agreement provided the public health, home health care and hospice agencies have approved written protocols in response to emergency situations and in the interest of public health and safety.</p>
Small bore feeding tubes	February 16, 2006	<p>Question: Is it within scope of practice for RNs to insert small bore feeding tubes?</p> <p>Board Response: This practice is within the scope of practice of a RN with appropriate competencies under Nur 305.01.</p>
IntaOcular pressure	February 16, 2006	<p>Question: Is it within scope of practice of the RN to measure Intra Ocular Pressure by aplanation using a Schiotz tonometer or a Tonopen?</p> <p>Board Response: The task is a non-nursing task; however a nurse with appropriate competencies can perform the procedure. The task would not count towards active-in-practice requirement.</p>
Cell saver unit	February 16, 2006	<p>Question: Is it within the scope of practice for a RN who is circulating a surgical case to run a cell saver (blood Salvage unit) at the same time? Is it within the scope of practice for a LPN to a run cell saver unit as well?</p> <p>Board Response: It is within the scope of practice for a licensed nurse to run a cell saver. However, Board cautions the circulating nurse to only accept an assignment that maintains the safety of the surgical patient.</p>
Rituximab	February 16, 2006	<p>Question: Is it within the scope of practice for a LPN to administer drug Rituximab?</p> <p>Board Response: It is not within scope of practice of LPN to administer drug Rituximab.</p>

		Further, Board opined Remicade administration is not within the scope of LPN practice.
RN coding/auditing	February 16, 2006	<p>Question: Is RN coding/auditing applicable to RN licensing renewal as active in practice?</p> <p>Board Response: RN coding/auditing does not count for active-in-practice hours required for licensure renewal.</p>
Astromorph	February 16, 2006	<p>Question: Can a RN give intermittent bolus of Astromorph into an epidural line that is being used for pain management after surgery?</p> <p>Board Response: It is not within the scope of practice of a licensed nurse to administer bolus Astromorph or other neuroaxial narcotics.</p>
RN Unsecured airway management	February 16, 2006	<p>Question: Is it within a RN scope of practice to manage an unsecured airway (an unintubated airway) when an anesthetic, such as propofol, is given by an ER physician?</p> <p>Board Response: It is not within the scope of practice of a licensed nurse to manage an unsecured airway.</p>
Surgical site marking	February 16, 2006	<p>Question: Is it within a RN scope of practice to mark a surgical site under controlled circumstances?</p> <p>Board Response: It is not within the scope of practice of a licensed nurse to mark a surgical site under controlled circumstances.</p>
Prescription deliveries by Home Care nurses	March 16, 2006	<p>Question: Question related to the delivery of prescriptions by visiting nurses.</p> <p>Board Response: (After guidance from Board of Pharmacy) Provided that the patient/client is</p>

		<p>unable to physically accept prescription medications mailed to his/her home address or for patients housed in skilled nursing facilities (or other public facilities) that do not accept delivery from public couriers, such prescription medications may be delivered to local VNA office and consequently delivered, by an agency nurse, directly to the physical location of the patient/client. Process is allowed only when the patient's/client's specific prescription medications are being shipped from a mail-order pharmacy, as defined in Ph 902.01(a), and authorized by Ph 907.01(e)(4) of NH Code of Administrative Rules. Delivery of prescription medications originating from local pharmacies must be made directly to the patient's/client's physical location and does not all for process described above.</p>
Pharmacist telephone order	March 16, 2006	<p>Question: Can the nurse transcribe a telephone order from the pharmacist?</p> <p>Board response: Several comments and additional information have been received and the board has revisited the question. At the 3/16/06 board meeting the board opined it is within the scope of the licensed nurse practice to accept a doctor's order that has been documented or clarified by the licensed pharmacist.</p>
Carotid massage	March 16, 2006	<p>Question: Is it within the scope of practice for the school nurse (RN) to perform carotid massage for supraventricular tachycardia if ordered by the student's doctor? Valsalva maneuver is performed first. If successful then the doctor wants carotid massage performed.</p> <p>Board response:</p>

		The board opined the procedure is within the scope of RN scope of practice provided the RN has competence as outlined in Nur 305.01 (c) & (d).
Astromorph and neuroaxial medications revisited	April 20, 2006	Question on Astromorph (February 2006) revisited at the Board meeting. The board opined RN administration of Astromorph and other neuroaxials is within the scope of practice provided Nur 305.01 (c) and (d) are followed.
Paracentesis	April 20, 2006	Question: Revisited question of whether or not it is within the RN scope of practice to complete procedure of paracentesis. Board response: The board opined that it is within the scope of nursing practice.
Neuromuscular blockade	April 28, 2006	Question: There are rare occasions where a patient has to be put on Neuromuscular blockade while being maintained on a ventilator. In other states, a specially trained RN, usually only in the ICU, can manage the drips for those patients. Board chair response: The procedure is within the scope of practice of the RN provided the licensed nurse has the competencies of Nur 305.01 (c) & (d).
Nitro sticks	May 18, 2006	Question: Is it within the scope of practice for a RN or LPN to use nitro sticks with a physician order? Board response: At its 5/18/06 board meeting the board opined this to be within the scope of nursing practice.
Sclerotherapy	May 18, 2006	Question: Is it under the RN scope of practice in NH to perform sclerotherapy injections, using sotradecol on spider veins at a physician's office? Board response: At its 5/18/06 meeting the board reviewed and

		<p>reconfirmed its February 2005 response which states, It is within the scope of practice of a RN to complete sclerotherapy with the following considerations:</p> <ol style="list-style-type: none"> 1. The supervising physician/ARNP performs and documents an initial assessment prior to treatment and as needed during the course of therapy. 2. The physician/ARNP is on-site, immediately available and able to respond promptly to any questions or problems that may occur while the procedure is being performed. 3. The RN has satisfactorily completed a documented education and training program which includes supervised practice and clinical skills competency as required under Nur 305.01 (c) & (d). 4. The facility has applicable policies and procedures and written orders for dealing with allergic reactions. 5. Continuing education for the procedure is ongoing and documented. <p>The practice of sclerotherapy is limited to telangiectasis (“spider veins”).</p>
PICC line removal	May 18, 2006	<p>Question: Is it within the scope of practice for a RN to remove a PICC line?</p> <p>Board response: The board opined it is within the RN scope provided the RN has the competencies as described in Nur 305.01 (c) & (d).</p>
Misoprostol for post partum hemorrhage	June 15, 2006	<p>Question: Is it within the scope of practice of the RN to administer rectal Misoprostol for post partum</p>

		<p>hemorrhage based upon a physician order?</p> <p>Board response: The board opined that it is within the scope of practice of the RN provided the institution develops policy and procedures.</p>
Telephone triage (LNA)	June 15, 2006	<p>Is it under the LNA scope of practice in NH to provide telephone triage in the physician office setting?</p> <p>Board response: At its 6/15/06 meeting the board reviewed and reconfirmed that telephone triage is not within the scope of practice for the LNA.</p>